

NARRAGANSETT POLICE DEPARTMENT

HOUSE / BUILDING CHECK FORM

Name _____ Date _____

Address _____ Type : Residence _____ Business _____

Location on street / Description _____

Phone # _____ Furnished? _____ Own or rent? _____

Will be unattended from _____ to _____

In case of an emergency notify _____

Address _____ Phone _____

Local caretaker's name _____ Phone # _____

Key for building available at _____

Any lights on or vehicles left in garage or yard? _____

Service personnel allowed on property (gas, cleaning, etc..) _____

Signature _____ Date _____

Date	Time	Officer ID #	Condition	Notified ?	Secure ?

PLEASE NOTIFY POLICE DEPARTMENT UPON RETURN TO YOUR PROPERTY. THANK YOU!